## UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. 242364US2

First Inventor or Application Identifier Hideo TANAKA

Title FACSIMILE APPARATUS ALLOWING FASY MANAGEMENT THROUGH FMAIL

nly for new nangrovisional applications under 37 CFR 1.53(b))										
	Sec	APPLICATION ELEMENTS a MPEP chapter 600 concerning utility patent application contents	Commissioner for Patents  ADDRESS TO: Mail Stop Patent Application Alexandria, Virginia 22313							
1.		Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)	ACCOMPANYING APPLICATION PARTS 4							
			7. Assignment Papers (cover sheet & document(s))							
2.		Specification Total Sheets 35	8. Application Data Sheet. See 37 CFR 1.76							
			9. 37 C.F.R. §3.73(b) Statement Power of Attorney							
3.		Drawing(s) (35 U.S.C. 113) Total Sheets 9	10. ☐ English Translation Document (if applicable)							
			11. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations (1)							
4.		Oath or Declaration Total Pages	12.   Preliminary Amendment							
	a.	☐ Newly executed (original or copy)	13. White Advance Serial No. Postcard							
	b.	☐ Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed)	14.   Certified Copy of Priority Document(s)  (if foreign priority is claimed)							
		<ol> <li>DELETION OF INVENTOR(S)         Signed statement attached deleting inventor(s) named in         the prior application, see 37 C.F.R. §1.63(d)(2) and         1.33(b).</li> </ol>	15. ☐ Applicant claims small entity status. See 37 CFR 1.27							
5.		CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	16. ☐ Other:							
3.	□ a.	Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  □   Computer Readable Form (CRF)								
	b.	Specification or Sequence Listing on :								
		i. CD-ROM or CD-R (2 copies); or	İ							
		ii. 🗆 Paper								
	C.	☐ Statements verifying identity of above copies								
7.	If a	CONTINUING APPLICATION, check appropriate box, and suppl	ly the requisite information below:							
		Continuation Divisional Continuation-	in-part (CIP) of prior application no.:							
F	rior	application information: Examiner:	Group Art Unit:							
r CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is naidered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon en a portion has been inadvenering writted for written or parts.										
18. CORRESPONDENCE ADDRESS										
Customer Number										
22850										
(703) 413-3000										
FACSIMILE: (703) 413-2220										

Name:	Marvin J. Spivak	Registration No.:	24,913
Signature:	Whom Morland	Date:	9/9/03
Name:	C. Irvin McClelland	Registration No.:	

Fiscistration Number 21

Docket No.

242364US2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Hideo TANAKA SERIAL NO:

New Application

FILING DATE: Herewith

FOR:

FACSIMILE APPARATUS ALLOWING EASY MANAGEMENT THROUGH EMAIL

## FEE TRANSMITTAL

COMMISSIONER FOR PATENTS ALEXANDRIA, VIRGINIA 22313

FOR		UME FILE			NUMBER EXTRA		RATE		CALCULATIONS
TOTAL CLAIMS	13	-	20	=	0	x	\$18	=	\$0.00
INDEPENDENT CLAIMS	1	-	3	=	0	x	\$84	=	\$0.00
☐ MULTIPLE DEPENDEN	☐ MULTIPLE DEPENDENT CLAIMS (If applicable) + \$280					\$280	=	\$0.00	
■ LATE FILING OF DECLARATION					+	\$130	=	\$130.00	
BASIC FE TOTAL OF ABOVE CALCULATION						EE	\$750.00		
						VS	\$880.00		
REDUCTION BY 50% FOR FILING BY SMALL ENTITY						\$0.00			
☐ FILING IN NON-ENGLISH LANGUAGE				+	\$130	=	\$0.00		
RECORDATION OF ASSIGNMENT				+	\$40	=	\$0.00		
TOTAL				\$880.00					

Please charge Deposit Account No.	15-0030 in the amount of	of \$0.00 A duplicate copy of this sheet is enclosed	1.

Credit card payment form is attached to cover the filing fee in the amount of \$880.00

☐ A check in the amount of \$0.00 to cover the filing fee is enclosed.

The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment form is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND, MAIER & NEUSTADT, P.C.

9/9/03

Customer Number

Tel. (703) 413-3000

Fax. (703) 413-2220 (OSMMN 05/03)

Marvin J. Spivak

Registration No. 24,913

C. In/in McClelland Esciairation Number 21,124